

OREGON TITLE XXI STATE PROGRAM FACT SHEET

Name of Plan: **Oregon SCHIP**

Date State Plan Submitted: March 2, 1998

Date State Plan Approved: June 12, 1998

Effective Date: July 1, 1998

Date Amendment #1 Submitted: August 13, 1999

Date Amendment #1 Withdrawn: July 2, 2001

Date Amendment #2 Submitted: May 30, 2000

Date Amendment #2 Approved: September 11, 2000

Date Amendment #2 Effective: January 1, 2000

Date Amendment #3 Submitted: December 20, 2000

Date Amendment #3 Approved: March 9, 2001

Date Amendment #3 Effective: January 1, 2001

Date Amendment #4 Submitted: July 31, 2002

Date Amendment #4 Approved: May 5, 2003

Background

- On March 2, 1998, Oregon submitted a Title XXI State plan to expand health insurance coverage to infants and children through a separate child health program.
- The program provides coverage to children from birth to age 6 with family incomes between 133 percent and 170 percent of the Federal poverty level (FPL) and to children from age 6 to age 19 with incomes between 100 percent and 170 percent of the FPL.

Amendments

- On August 13, 1999, the State submitted an amendment to allow employer-sponsored coverage through its Family Health Insurance Assistance Program via a Health Insurance Purchasing Cooperative, and to request a family coverage waiver. This request was withdrawn.
- On May 30, 2000, the State submitted a second amendment to revise several of its performance measures.

- On December 20, 2000, the State submitted a third amendment to increase the number of children permitted under the State's enrollment cap from 16,800 (as stated in the original State plan) to approximately 19,800 children.
- On July 31, 2002, the State submitted its fourth amendment. This amendment updates and amends the SCHIP State plan to indicate the State's compliance with the final SCHIP regulations.

Children Covered under the Program

- The State reports that there were 42,976 children ever enrolled in SCHIP in Federal fiscal year 2002.

Administration

- The State's Office of Medical Assistance Programs (OMAP), within the Department of Human Resources, administers the program.

Health Care Delivery System

- The State utilizes the same delivery system for SCHIP as it uses for its section 1115 Medicaid managed care delivery system, the Oregon Health Plan (OHP), to deliver services. The delivery system is comprised of prepaid health plans and primary care case managers.

Benefit Package

- The separate child health program offers Secretary-approved coverage that is the same as coverage offered under the State's Medicaid program. The State's benefit package is based on the OHP Prioritized List of Health Services which is a modified Medicaid benefit package as allowed under Oregon's section 1115 Medicaid demonstration waiver for its entire Medicaid population. Medically necessary services are defined in the Prioritized List.
- The comprehensive benefit package includes case management, preventive health care, interpreter services, and non-emergency transportation services at no additional cost.

Cost Sharing

- There are no premiums, copayments, or deductibles for enrollees.

State Action to Avoid Crowd-Out

- Information on current or previous health insurance is gathered on the application. Children are not eligible if they have been enrolled in private insurance within the past 6 months, except in cases of a life threatening or disabling condition. The State monitors substitution under its Quality Control and Quality Assurance process to analyze the extent to which an applicant drops other health plan coverage.

Outreach Activities

- Outreach for SCHIP has been incorporated into existing OHP Medicaid outreach activities, which includes the following activities:
 - Providing application assistance at Disproportionate Share Hospitals, Federally Qualified Health Centers, and tribal health clinics.
 - The VISTA Health Links program, which utilizes volunteers to provide assistance and information on the Oregon Health Plan, immunizations, prenatal care and other health issues and concerns.
 - Outreach to patients admitted to hospitals, also referred to as “Hospital Hold.”
 - SAFENET, which is a community partnership program that provides a statewide toll free information/referral phone line for Oregonians.
 - Outreach through Healthy Start.
 - Application assistance at local health departments.

Coordination Between SCHIP and Medicaid

- Oregon's SCHIP program was designed to be seamless with the State's section 1115 Medicaid demonstration waiver. A single application and eligibility determination process, as well as the same quality improvement program, are used for both SCHIP and Medicaid.

Financial Information

Total FFY 2003 SCHIP Allotment: \$40,708,703

FFY 2003 Enhanced Federal Matching Rate: 72.11%

Updated: CMS, CMSO, FCHPG, DSCHI, May 6, 2003